Having a Baby?
10 Questions to Ask

Have you decided how to have your baby? The choice is yours!

First, you should learn as much as you can about all your choices. There are many different ways of caring for a mother and her baby during labor and birth.

Birthcare that is better and healthier for mothers and babies is called “mother-friendly.” Some birth places or settings are more mother-friendly than others.

A group of experts in birthcare came up with this list of 10 things to look for and ask about. Medical research supports all of these things. These are also the best ways to be mother-friendly.

When you are deciding where to have your baby, you’ll probably be choosing from different places such as:

- birth center,
- hospital, or
- home birth service.

Here’s what you should expect, and ask for, in your birth experience. Be sure to find out how the people you talk with handle these 10 issues about caring for you and your baby. You may want to ask the questions below to help you learn more.

Ask, “Who can be with me during labor and birth?”

Mother-friendly birth centers, hospitals, and home birth services will let a birthing mother decide whom she wants to have with her during the birthing. This includes fathers, partners, children, other family members, or friends.

They will also let a birthing mother have with her a person who has special training in helping women cope with labor and birth. This person is called a doula or labor support person. She never leaves the birthing mother alone. She encourages her, comforts her, and helps her understand what’s happening to her.

They will have midwives as part of their staff so that a birthing mother can have a midwife with her if she wants to.

Ask, “What happens during a normal labor and birth in your setting?”

If they give mother-friendly care, they will tell you how they handle every part of the birthing process. For example, how often do they give the mother a drug to speed up the birth? Or do they let labor and birth usually happen on its own timing? They will also tell you how often they do certain procedures. For example, they will have a record of the percentage of C-sections (Cesarean births) they do every year. If the number is too high, you’ll want to consider having your baby in another place or with another doctor or midwife.

Here are numbers we recommend you ask about.

- They should not use oxytocin (a drug) to start labor for more than 1 in 10 women (10%).

- They should not do an episiotomy (ee-peezee-AH-tummy) on more than 1 in 5 women (20%). They should be trying to bring that number down. (An episiotomy is a cut in the opening to the vagina to make it larger for birth. It is not necessary most of the time.)

- They should not do C-sections on more than 1 in 10 women (10%) if it’s a community hospital. The rate should be 15% or less in hospitals which care for many high-risk mothers and babies.

A C-section is a major operation in which a doctor cuts through the mother’s stomach into her womb and removes the baby through the opening. Mothers who have had a C-section can often have future babies normally. Look for a birth place in which 6 out of 10 women (60%) or more of the mothers who have had C-sections go on to have their other babies through the birth canal.

Ask, “How do you allow for differences in culture and beliefs?”

Mother-friendly birth centers, hospitals, and home birth services are sensitive to the mother’s culture. They know that mothers and families have differing beliefs, values, and customs.

For example, you may have a custom that only women may be with you during labor and birth. Or perhaps your beliefs include a religious ritual to be done after birth. There are many other examples that may be very important to you. If the place and the people are mother-friendly, they will support you in doing what you want to do. Before labor starts tell your doctor or midwife special things you want.

Ask, “Can I walk and move around during labor? What position do you suggest for birth?”

In mother-friendly settings, you can walk around and move about as you choose during labor. You can choose the positions that are most comfortable and work best for you during labor and birth. (There may be a medical reason for you to be in a certain position.) Mother-friendly settings almost never put a woman flat on her back with her legs up in stirrups for the birth.

Ask, “How do you make sure everything goes smoothly when my nurse, doctor, midwife, or agency need to work with each other?”

Ask, “Can my doctor or midwife come with me if I have to be moved to another place during labor? Can you help me find people or agencies in my community who can help me before and after the baby is born?”

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Mother-friendly places and people will have a specific plan for keeping in touch with the other people who are caring for you. They will talk to others who give you birth care. They will help you find people or agencies in your community to help you. For example, they may put you in touch with someone who can help you with breastfeeding.

Ask, “What things do you normally do to a woman in labor?”

Experts say some methods of care during labor and birth are better and healthier for mothers and babies. Medical research shows us which methods of care are better and healthier. Mother-friendly settings only use methods that have been proven to be best by scientific evidence.

Sometimes birth centers, hospitals, and home birth services use methods that are not proven to be best for the mother or the baby. For example, research has shown it’s usually not helpful to break the bag of waters.

Here is a list of things we recommend you ask about. They do not help and may hurt healthy mothers and babies. They are not proven to be best for the mother or baby and are not mother-friendly.

• They should not keep track of the baby’s heart rate all the time with a machine (called an electronic fetal monitor). Instead, it is best to have your nurse or midwife listen to the baby’s heart from time to time.
• They should not break your bag of waters early in labor.
• They should not use an IV (a needle put into your vein to give you fluids).
• They should not tell you that you can’t eat or drink during labor.
• They should not shave you.
• They should not give you an enema.

A birth center, hospital, or home birth service that does these things for most of the mothers is not mother-friendly. Remember, these should not be used without a special medical reason.

Ask, “How do you help mothers stay as comfortable as they can be? Besides drugs, how do you help mothers relieve the pain of labor?”

The people who care for you should know how to help you cope with labor. They should know about ways of dealing with your pain that don’t use drugs. They should suggest such things as changing your position, relaxing in a warm bath, having a massage and using music. These are called comfort measures.

Comfort measures help you handle your labor more easily and help you feel more in control. The people who care for you will not try to persuade you to use a drug for pain unless you need it to take care of a special medical problem. All drugs affect the baby.

Ask, “What if my baby is born early or has special problems?”

Mother-friendly places and people will encourage mothers and families to touch, hold, breastfeed, and care for their babies as much as they can. They will encourage this even if your baby is born early or has a medical problem at birth. (However, there may be a special medical reason you shouldn’t hold and care for your baby.)

Ask, “Do you circumcise babies?”

Medical research does not show a need to circumcise baby boys. It is painful and risky. Mother-friendly birth places discourage circumcision unless it is for religious reasons.

Ask, “How do you help mothers who want to breastfeed?”

The World Health Organization made this list of ways birth services support breastfeeding.

• They tell all pregnant mothers why and how to breastfeed.
• They help you start breastfeeding within one hour after your baby is born.
• They show you how to breastfeed. And, they show you how to keep your milk coming in even if you have to be away from your baby for work or other reasons.
• Newborns should have only breast milk. (However, there may be a medical reason they cannot have it right away.)
• They encourage you and the baby to stay together all day and all night. This is called “rooming-in.”
• They encourage you to feed your baby whenever he or she wants to nurse, rather than at certain times.
• They should not give pacifiers (“dummies” or “soothers”) to breastfed babies.
• They encourage you to join a group of mothers who breastfeed. They tell you how to contact a group near you.
• They have a written policy on breastfeeding. All the employees know about and use the ideas in the policy.
• They teach employees the skills they need to carry out these steps.

Would you like to give this information to your doctor, midwife, or nurse?

This information is taken from the Mother-Friendly Childbirth Initiative written for health care providers. You can get a copy of the Initiative for your doctor, midwife, or nurse by mail, e-mail, or on the Internet.

To Get a Copy by Mail
For a copy of both this brochure and the Mother-Friendly Childbirth Initiative by mail, send a stamped, self-addressed envelope with $5 (US) to help cover the costs ($6 Canada or Mexico, $10 all others). Bulk prices are available. Mail to:
Coalition for Improving Maternity Services
1500 Sunday Drive, Suite 102
Raleigh, NC 27607

To Get a Copy on the Internet
Log on to www.motherfriendly.org

Contact CIMS
Tel: 888-282-CIMS (2467) • Fax: 919-787-4916
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Making Mother-Friendly Care a Reality